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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	P160	/ESTMENTS AS: 00059803	SOCIATES CORP	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	MARTA LUCIA C	TALORA		
•		Name of Contact Person	n	
	MO ACCOUNTIN	IG SERVICES (CORP	
•		Firm/ Company		
	7751 W 28 AVEN	IUE, SUITE #4		
•		Address		
	HIAEAH, FL 330°	16		
•		City/ State and Zip Cod	e ·	
info	@moaccountings	services.com	•	16 TAI
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	oncerning this matter, pleas	e call:		There are the second and the second are the second
OLGA L. PUE	ERTA	_{at (} 786	338-0797	
Name o	of Contact Person	Area Co	de & Daytime Telephone Nur	nber &
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:	:•
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fiting Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ling Address		Address	
Ame	ndment Section	Amend	lment Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

of

BEARS INVESTMENTS ASSOCIATES CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P16000059803

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments) to its Articles of Incorporation: its Articles of Incorporation:

me must be distinguishable and con Corp.," "Inc.," or Co.," or the desig ord "chartered," "professional associ	nation "Corp," "Inc,"	or "Co". A professiona	
Enter new principal office address. rincipal office address <u>MUST BE A S</u>	if applicable:		STREET, MIAMI FL 331
Enter new mailing address, if app	licable:	604 NE 191ST S	STREET, MIAMI FL 3317
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX		
(Mailing address <u>MAY BE A POST</u> If amending the registered agent a	nd/or registered office w registered office ad	address in Florida, ente	r the name of the
Mailing address <u>MAY BE A POST</u> f amending the registered agent a	nd/ar registered office	address in Florida, ente	r the name of the
(Mailing address <u>MAY BE A POST</u> If amending the registered agent a new registered agent and/or the ne	nd/or registered office w registered office ad N/A	address in Florida, ente dress:	r the name of the
(Mailing address MAY BE A POST If amending the registered agent a new registered agent and/or the ne	nd/or registered office w registered office ad N/A (Flori	address in Florida, ente	r the name of the

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove			
3) Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			

<u>11 an</u> (Atta	nending or adding additional Articles, enter change(s) here: ch additional sheets, if necessary). (Be specific)
N/A	
	•
. If ar	amendment provides for an exchange, reclassification, or cancellation of issued shares, visions for implementing the amendment if not contained in the amendment itself:
pro	(if not applicable, indicate N/A)
N/A	

he date of each amendment(s) adate this document was signed.		
ffective date <u>if applicable</u> :	07.15.2016	
meetive date <u>it appiteable</u> .	(no more than 90 days after amendment file date)	_
doption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
a	(voting group)	
The amendment(s) was/were adopaction was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder action and shareholder	
Dated 08.03.20	16	
Signature	ga Lucia Rustatt	_
(By a di selected	ctor, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
-	Olgahucia Puerta H. (Typed or printed name of person signing)	_
	PRESIDENT	
•	(Title of person signing)	-
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